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## BIB DATA SHEET

CONFIRMATION NO. 9214

<b>SERIAL NUMBER</b> 10/630,180	<b>FILING or 371(c) DATE</b> 07/30/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> 10709/47	
<b>APPLICANTS</b> Zheng Wei, Redwood City, CA; <b>** CONTINUING DATA *****</b> This application is a CIP of 10/154,399 05/22/2002 PAT 7,282,338 RMD which claims benefit of 60/296,682 06/07/2001 <b>** FOREIGN APPLICATIONS *****</b> NONE RMD <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 10/27/2003					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /REGINA M DEBERRY/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 14	<b>TOTAL CLAIMS</b> 60	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> K. Shannon Mrksich Brinks Hofer Gilson & Lione P.O. Box 10395 Chicago, IL 60610 UNITED STATES					
<b>TITLE</b> Method for multiple chemokine receptor screening for antagonists using RAM assay					
<b>FILING FEE RECEIVED</b> 835	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		